

Work Order ID 96804

96804

Page 1

February 5, 2013 9:28:26 AM

Item ID: D3335

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Spring

Start Date: 2/05/13 Start Qty: 15.00

15

Cust Item ID:

Required Date: 2/08/13 Req'd Qty: 15.00

15

Customer:

Reference:

Approvals: Process Plan: *CL*

Date: 13/02/05 Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Draw Nbr	Revision Nbr	Set Up	Run Hours	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	asp. Stamp
D3335	Rev D								

100

0.00

100

PURCHASING

0.00

Purchasing

Memo

Purchasing

Issue P/O: 19025

Manufacture as per dwg D3335

Possible supplier: Victory Springs

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

Ensure Material Release Note is attached

120

QC5- Inspect part completeness to step on W/O

0.00

120

QC

Memo

0.00

Quality Control

13-02-5

13/4/15 (15)

1326

15

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Work Order ID 96804***96804***

Page 2

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15

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run HoursTool ID Tool # Plan Accept Reject Reject Insp.
Code Qty Qty Number Stamp

130

Identify as per dwg & Stock Location: *GA*

0.00

130

Packaging

Memo

0.00

Packaging

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

*15**SB 13/02/06**ML5 13-02-07**MF**13-02-07*

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

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QA Closed: _____ Date: _____

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Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

February 5, 2013 9:28:25 AM

Page 1

Work Order ID: 96804

Parent Item: D3335

Parent Item Name: Spring

Start Date: 2/05/13

Required Date: 2/08/13

Start Qty: 15.00

Required Qty: 15.00

Comments: IPP A04.11.23New issueKJ/JLM
esr B 07.04.04 rev C dwg EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D3335-P Spring		Purchased	No			110	Each f	0.0000	1	15			

P13/2/6 (15)

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

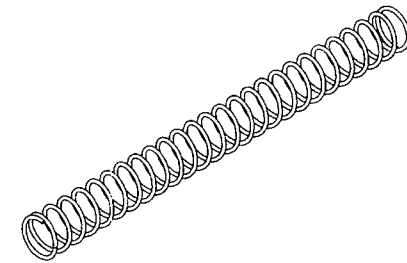
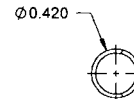
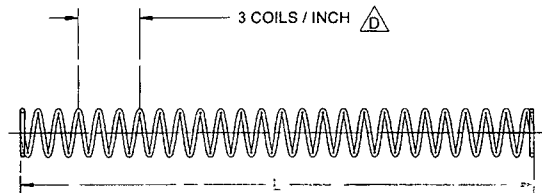
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SPECIFICATION CONTROL DRAWING



D3335-X SPRING

DART P/N	L (in)	
D3335-1	4.38	△B
D3335-3	7.63	△B
D3335-5	1.20	△C

RELEASED
9/2/05/WP

NOTES:

- 1) MATERIAL: SPRING STEEL, Ø0.035 WIRE
- 2) FINISH: LPS PROCYON
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) POSSIBLE SUPPLIER: VICTORY SPRINGS, LENGTH REQUIRED: 12"

REV.	DESCRIPTION	BY	DATE
D	ADD 3 COILS / INCH	PH	08.06.05
C	ADDED D3335-5, CHANGED FINISH	RF	05.12.19
B	4.38 WAS 4.13; 7.63 WAS 6.80	MB	05.08.11
A	NEW ISSUE	MB	04.12.07
DESIGN	MB	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	MB		
CHECKED	MB	DRAWING NO.	REV. D
MFG. APPR.	MB	D3335	SHEET 1 OF 1
APPROVED	MB	TITLE	SCALE
DE APPR.	MB	SPRING	NTS
DATE	08.06.05	<small>COPYRIGHT © 2004 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO19025

Purchase Order Date 2/05/13

PO Print Date 2/05/13

Page Number 1 of 1

Order From :

VC-VIC002

VICTORY SPRING LTD.
#2 6104 - 82 AVE.
EDMONTON, AB T6B 0E7
CA

Contact Name

Buyer

Brigitte Golden

Vendor Phone

866 230 5312

Requisition Nbr

Vendor Fax

866 230 5338

Tax Resale Nbr

10127-2607

Vendor Account Nbr

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FXED
69131005

Line Nbr	Reference Revision ID	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
2	<u>D3335-P</u>	Spring	2/08/13 Yes	15.00 f	FedEx PI collect	\$15.2821	\$229.23

Special Inst:

As per DWG: D3335 Rev:D
B96804
SP

PO Total:

\$229.23

Change Nbr: 2

Change Date: 2/05/13

No substitution or deviation without
consent.

Certificate of Conformity or Material
Certification required - YES NO



PACKING SLIP

26394

#2, 6104 - 82 Ave
Edmonton, AB T6B 0E7
t + 780 442 4020
f + 780 466 8000

BILL TO:

Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7

SHIP TO:

Dart Aerospace Ltd
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7

DATE		ORDER No.		SHIP VIA	
Feb 05, 2013		19025		Fed Ex	
QUANTITY	DESCRIPTION			UNIT	AMOUNT
15	D3335-P Compression Spring 12" length				
GST #	TERMS	SUBTOTAL	FREIGHT	GST	TOTAL
854454527	NET 30 DAYS				